Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
DISTRICT OF NEW JERSEY			
Case number (if known)	Chapter you are filing under:		
	☐ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	■ Chapter 13	_	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Joseph First name B Middle name Klepka, Jr Last name and Suffix (Sr., Jr., II, III)	Regina First name L Middle name Klepka Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7191	xxx-xx-8608

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		201 Paris Avenue	
		Brooklawn, NJ 08030 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Number, Street, City, State & Zii Code	Number, Street, Sity, State & Zii Gode
		Camden	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	otor 1 otor 2	Joseph B Klepka, Regina L Klepka	Jr				Case number (if known)	
Par	rt 2:	Tell the Court About \	Your Banl	cruptcy Ca	ase			
7.	Bank	chapter of the cruptcy Code you are				ach, see Notice Required by le 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankru b box.	uptcy
	choc	sing to file under	☐ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			■ Chap	oter 13				
8.	How	you will pay the fee	ab ord	out how yo	ou may pay. Typicall attorney is submittir	y, if you are paying the fee yo	with the clerk's office in your local court for more urself, you may pay with cash, cashier's check, or all, your attorney may pay with a credit card or che	r money
					y the fee in installn ee in Installments (O		n, sign and attach the Application for Individuals	to Pay
			□ Ire bu ap	equest that t is not rec plies to yo	at my fee be waived quired to, waive your ur family size and yo	I (You may request this option fee, and may do so only if you are unable to pay the fee in	only if you are filing for Chapter 7. By law, a judgur income is less than 150% of the official poverty installments). If you choose this option, you mustial Form 103B) and file it with your petition.	line that
9.	bank	e you filed for cruptcy within the B years?	■ No. □ Yes.					
	iast	o years:	☐ res.	District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
	filed not f you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
	. 5510		☐ Yes.	Has yo	our landlord obtained	d an eviction judgment agains	you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial</i> this bankruptcy per		ludgment Against You (Form 101A) and file it as p	part of

Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Number, Street, City, State & ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(61D). No.	
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Wimber, Street, City, State & ZIP Code	
of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Name of business, if any	
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Number, Street, City, State & ZIP Code	
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Number, Street, City, State & ZIP Code	
Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor so that it can set approx deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statem you a small business debtor, sea 11 U.S.C. 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11. but I am NOT a small business debtor according to the definition in the Bankruptcy Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy	
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13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proceeding in 11 U.S.C. 1116(1)(B). I am not filing under Chapter 11. I am filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proceeding in 11 U.S.C. 1116(1)(B). I am not filing under Chapter 11. No. I am filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance sheet, statem operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proceeding in 11 U.S.C. 1116(1)(B). No. I am filing under Chapter 11. I am filing under Chapter 11 and I am NOT a small business debtor according to the definition in the Bankruptcy in the definition in the Bankrup	
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). I am filling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy.	
For a definition of small business debtor, see 11 U.S.C. § 101(51D). I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy	nent of
U.S.C. § 101(51D). Tam filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankr Code. Tyes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy	
	ruptcy
Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention	y Code.
The state of the s	
14. Do you own or have any ■ No.	
property that poses or is alleged to pose a threat Yes. of imminent and What is the hazard?	
identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? If immediate attention is needed, why is it needed?	
For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?	
Number, Street, City, State & Zip Code	

Debtor 1 Joseph B Klepka, Jr Debtor 2 Regina L Klepka

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

] Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 2 Regina L Klepka	J1			Case nu	umber (if known)	
Part	6: Answer These Questi	ions for Re	eporting Purposes				
	What kind of debts do you have?	16a.	Are your debts primarily consu individual primarily for a personal,			e defined in 11 U.S	S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily busine money for a business or investme				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	nat are not consun	ner debts or bus	siness debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab				led and administrative expenses
	administrative expenses		□ No				
	are paid that funds will be available for		□Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,000		1 25,0	001-50,000
	you estimate that you owe?	□ 50-99		<u> </u>			001-100,000
		☐ 100-19 ☐ 200-99		10,001-25,00	00	⊔ Mor	re than100,000
19.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 -	· \$10 million	□ \$500	0,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001			000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00			,000,000,001 - \$50 billion re than \$50 billion
		— \$500,0					
20.	How much do you estimate your liabilities	□ \$0 - \$£		<u> </u>			0,000,001 - \$1 billion
	to be?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001			000,000,001 - \$10 billion 0,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 □ \$100,000,00			re than \$50 billion
		_ +000,	ψ				
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I declare	under penalty of p	erjury that the i	information provide	ed is true and correct.
			chosen to file under Chapter 7, I an ates Code. I understand the relief				
			ney represents me and I did not pa t, I have obtained and read the not				to help me fill out this
		I request	relief in accordance with the chapt	er of title 11, Unite	ed States Code,	, specified in this p	petition.
			and making a false statement, conc cy case can result in fines up to \$2:				
		/s/ Jose	ph B Klepka, Jr		/s/ Regina L		
			B Klepka, Jr e of Debtor 1		Regina L Kle Signature of D		
		Executed	on February 8, 2019		Executed on	February 8, 20	119
			MM / DD / YYYY			MM / DD / YYYY	

Joseph B Klepka, Jr Regina L Klepka	Case number (if known)	
 regina E riiepka		

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brad J.	Sadek, Esquire	Date	February 8, 2019	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Brad J. Sa	dek, Esquire			
Printed name				
Sadek and	Cooper			
Firm name	-			
1315 Waln	ut Street			
Suite 502				
Philadelph	nia, PA 19107			
Number, Street,	City, State & ZIP Code			
Contact phone	215-545-0008	Email address	brad@sadeklaw.com	
NJ				
Bar number & St	ate			

Fill	n this information to identify your case:		
Deb	tor 1 Joseph B Klepka, Jr		
Deb	First Name Middle Name Last Name tor 2 Regina L Klepka		
(Spot	sse if, filing) First Name Middle Name Last Name		
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY		
Cas (if kno	e number	_	ck if this is an nded filing
	icial Form 106Sum nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a infor	s complete and accurate as possible. If two married people are filing together, both are equally responsible to mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		ing correct
T all	1. Julillianze rour Assets		assets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	112,172.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	237,531.80
	1c. Copy line 63, Total of all property on Schedule A/B	\$	349,703.80
Part	2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	•	108,382.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$	124,715.00
	Your total liabilities	\$	233,097.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,650.84
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,757.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily fo household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	: a persona	al, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check th	is box and	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,388.26

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Difficial Form 106A/B Schedule A/B: Property 12/15 12/15 12/15 12/15 12/15 12/15 12/16 12/16 12/16 12/16 12/16 12/17 12/17 12/17 12/17 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18 12/18	Debtor 1	Joseph B KI	epka, Jr					
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Check if this is amended filing	spouse, ii iiiirig)	First Name	Middle	e name	Last Name			
Difficial Form 106A/B Schedule A/B: Property acach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where y ink if it is best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Saver every question. To be pour own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land City State ZIP Code Who has an interest in the property? Check one Debtor 1 only Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Market Value \$112,172.00 minus 10% cost of sale = \$100,954.80	Inited States Bar	nkruptcy Court for	the: DISTRICT	OF NEW JERSE	Υ			
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Manufactured or mobile home	201 Paris		cription	Single-fa	amily home			
Brooklawn NJ 08030-0000 City State State	201 Paris		scription	Single-fa	amily home or multi-unit building	the amount of	f any secured	d claims on Schedule D:
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Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Deb		Joseph B Kle Regina L Kle	•		Case number (if ki	nown)	
3. C a	ars, vans	, trucks, tracto	ors, sport utility ve	hicles, motorcycles			
П	No						
_	Yes						
_	162						
3.1	Make:	Chevrolet		Who has an interest in the property? Check one			aims or exemptions. Put
	Model:	Trailblaze	r	□ Debtor 1 only			d claims on Schedule D: ns Secured by Property.
	Year:	1997		Debtor 2 only			
	Approxi	imate mileage:	89000	■ Debtor 1 and Debtor 2 only	Current val entire prop		Current value of the portion you own?
	Other in	nformation:		☐ At least one of the debtors and another			
				☐ Check if this is community property		\$834.00	\$834.00
				(see instructions)			
5 A .p	ages you	u have attache	d for Part 2. Write				\$834.00
Doy	ou own	or have any le	gal or equitable in	terest in any of the following items?		Ĺ	Current value of the portion you own? On not deduct secured claims or exemptions.
E	xamples: No	d goods and fu Major appliand escribe		, china, kitchenware			
			Used Personal	Household Goods and Furnishings			\$1,500.00
E	l No	Televisions an		eo, stereo, and digital equipment; computers, p nedia players, games	rinters, scanners; m	usic collection	ons; electronic devices
			Used Personal	Electronics (Cellphone, TV, Computer)			\$500.00
E	xamples:		igurines; paintings, ns, memorabilia, co	prints, or other artwork; books, pictures, or othe llectibles	er art objects; stamp	, coin, or bas	seball card collections;
9. E c	quipmen xamples:	t for sports an	graphic, exercise, ar	nd other hobby equipment; bicycles, pool tables	s, golf clubs, skis; ca	noes and ka	yaks; carpentry tools;

	ebtor 1 ebtor 2	Regina L Kle		ſ	Case number (if kno	vn)
10.	Firearn					
	Examp ■ No	ples: Pistols, rifles	, shotgur	ns, ammunition, and	related equipment	
		Describe				
11.	□ No Î		thes, fur	s, leather coats, desi	gner wear, shoes, accessories	
			Head	Personal Clothing	•	\$500.00
			USEU I	r ersonar Clottillig		Ψ300.00
12.	□ No		velry, cos	stume jewelry, engag	ement rings, wedding rings, heirloom jewelry, watches, gen	s, gold, silver
			Used I	Personal Jewelry	(Wedding Bands)	\$500.00
14.	Any otl ■ No	Describe ther personal and Give specific info		-	not already list, including any health aids you did not lis	ŧ
15					art 3, including any entries for pages you have attached	\$3,000.00
Pa	rt 4: De	scribe Your Financ	ial Asset	s		
Do	you ow	wn or have any le	gal or e	quitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		·		me, in a safe deposit box, and on hand when you file your p	etition
					Cash on Han	\$150.00
17.	Examp				unts; certificates of deposit; shares in credit unions, brokera with the same institution, list each. Institution name:	ge houses, and other similar
			17.1.	Checking	Energy People Federal Credit Union ending 1000	\$148.10
			17.2.	Checking	Frist Colonial Personal Checking account ending 1094	\$231.17

Official Form 106A/B Schedule A/B: Property page 3

	btor 1 btor 2	Joseph B Klep Regina L Klepl		Case number (if known)	
	_Examp		publicly traded stocks restment accounts with br	orokerage firms, money market accounts	
	□ No ■ Yes		Institution or issuer	r name:	
			Company Stock	k	\$1,000.00
40	N				an II C mantinanahin ana
	joint v	enture	k and interests in incorp	porated and unincorporated businesses, including an interest in	an LLC, partnersnip, and
	■ No	0:	and a substitution		
	⊔ Yes.	Give specific inform	nation about them Name of entity:	% of ownership:	
	Negoti Non-n	<i>iable instrument</i> s inc	clude personal checks, ca	potiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	■ No				
	⊔ Yes.	Give specific inform	ation about them Issuer name:		
		ment or pension acoles: Interests in IRA		403(b), thrift savings accounts, or other pension or profit-sharing plan	s
	_	l :at a a ab a a a at a			
	■ Yes.	List each account s	eparately. Type of account:	Institution name:	
				Fidelity NetBenefits Retirement Account	\$232,168.53
				so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies,	or others
	☐ Yes.			Institution name or individual:	
	Annuit ■ No	ies (A contract for a	periodic payment of mon	ney to you, either for life or for a number of years)	
	☐ Yes	lssue	er name and description.		
	26 U.S.		IRA, in an account in a coA(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition progra	m.
	■ No □ Yes	Instit	ution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts	, equitable or futur	e interests in property (other than anything listed in line 1), and rights or powers exercis	able for your benefit
		Give specific inform	nation about them		
26.				and other intellectual property eds from royalties and licensing agreements	
	■ No □ Yes.	Give specific inform	nation about them		
	Licens	es, franchises, and	d other general intangib	oles operative association holdings, liquor licenses, professional licenses	
	■ No	Give specific inform		,	
		•			
Mo	oney or	property owed to y	ou?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

	ebtor 1 ebtor 2	Joseph B Klepka, Jr Regina L Klepka	Case number (if known)	
28.	. Tax refu	unds owed to you		
	■ No □ Yes. 0	Give specific information about them, including whet	ther you already filed the returns and the tax years	
29	■ No		t, child support, maintenance, divorce settlement, property s	settlement
30.	Examp ■ No	mounts someone owes you les: Unpaid wages, disability insurance payments, d benefits; unpaid loans you made to someone el Give specific information	lisability benefits, sick pay, vacation pay, workers' compensise	sation, Social Security
31.	. Interest	s in insurance policies	gs account (HSA); credit, homeowner's, or renter's insuranc	ce
		Name the insurance company of each policy and list Company name:	t its value. Beneficiary:	Surrender or refund value:
32.	If you a someon	erest in property that is due you from someone were the beneficiary of a living trust, expect proceeds from the has died. Give specific information	who has died from a life insurance policy, or are currently entitled to recei	ve property because
33.	Examp ■ No	against third parties, whether or not you have filles: Accidents, employment disputes, insurance clair		
34.	■ No	ontingent and unliquidated claims of every nature Describe each claim	re, including counterclaims of the debtor and rights to	set off claims
35.	■ No	ancial assets you did not already list Give specific information		
36		ne dollar value of all of your entries from Part 4, int 4. Write that number here	including any entries for pages you have attached	\$233,697.80
Pa	art 5: Des	cribe Any Business-Related Property You Own or Have	e an Interest In. List any real estate in Part 1.	
	No. Go	wn or have any legal or equitable interest in any busine to Part 6. o to line 38.	ess-related property?	
Pa		cribe Any Farm- and Commercial Fishing-Related Prop u own or have an interest in farmland, list it in Part 1.	perty You Own or Have an Interest In.	
46	No. 0	own or have any legal or equitable interest in an Go to Part 7. Go to line 47.	ny farm- or commercial fishing-related property?	

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

Debt			Case number (if known)	
	o you have other property of any kind you did not already I Examples: Season tickets, country club membership	list?		
	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write	e that number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$112,172.00
56.	Part 2: Total vehicles, line 5	\$834.00		
57.	Part 3: Total personal and household items, line 15	\$3,000.00		
58.	Part 4: Total financial assets, line 36	\$233,697.80		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$237,531.80	Copy personal property total	\$237,531.80
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$349,703.80

Fill in this infor	mation to identify your	case:		
Debtor 1	Joseph B Klepka	, Jr		
	First Name	Middle Name	Last Name	
Debtor 2	Regina L Klepka			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number _				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)					
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	201 Paris Avenue Brooklawn, NJ 08030 Camden County	\$112,172.00		\$17,315.00	11 U.S.C. § 522(d)(1)				
	Market Value \$112,172.00 minus 10% cost of sale = \$100,954.80 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit					
	1997 Chevrolet Trailblazer 89000 miles	\$834.00		\$834.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit					
	Used Personal Household Goods and Furnishings	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Used Personal Electronics (Cellphone, TV, Computer)	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Used Personal Clothing Line from Schedule A/B: 11.1	\$500.00	\$500.00		11 U.S.C. § 522(d)(3)				
	Line from <i>Schedule PVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit					

	otor 2 Regina L Klepka, Jr		Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Used Personal Jewelry (Wedding Bands)	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)		
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit			
	Cash on Hand Line from Schedule A/B: 16.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(5)		
	Ellie Helli Gohedale 772. Peri			100% of fair market value, up to any applicable statutory limit			
	Checking: Energy People Federal Credit Union ending 1000	\$148.10		\$148.10	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit			
	Checking: Frist Colonial Personal Checking account ending 1094	\$231.17		\$231.17	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit			
	Company Stock Line from Schedule A/B: 18.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)		
	Line from Schedule Alb. 10.1			100% of fair market value, up to any applicable statutory limit			
	Fidelity NetBenefits Retirement	\$232,168.53		\$232,168.53	11 U.S.C. § 522(d)(12)		
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No □ Yes. Did you acquire the property cover	3 years after that for ca	ises fi	·	,		
	□ No						

☐ Yes

Fill in this informa	ation to identify you	r case:				
Debtor 1	Joseph B Klepk					
Dahtar 0	First Name		ast Name			
Debtor 2 (Spouse if, filing)	Regina L Klepka First Name		ast Name			
	kruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number					_	if this is an
					amend	led filing
Official Form	106D					
Schedule [D: Creditors	Who Have Claims Se	ecured	by Property	/	12/15
		If two married people are filing together, out, number the entries, and attach it to t				
	nave claims secured by	your property?				
☐ No. Check t	this box and submit th	nis form to the court with your other sc	hedules. You	u have nothing else to	report on this form.	
Yes. Fill in a	all of the information I	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the credito	or separately	Column A	Column B	Column C
		a particular claim, list the other creditors in cal order according to the creditor's name.	Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 1st Colonia	al Community	Describe the property that secures the	claim:	\$8,014.00	\$112,172.00	\$0.00
Creditor's Name		201 Paris Avenue Brooklawn, 08030 Camden County Market Value \$112,172.00 minu 10% cost of sale = \$100,954.80 As of the date you file, the claim is: Che	us)			
210 Lake D Cherry Hill	Or E Ste 300	apply.	or all triat			
	City, State & Zip Code	☐ Contingent☐ Unliquidated				
Number, Street, C	City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as more	tgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
	e debtors and another	Judgment lien from a lawsuit				
Check if this claic		Other (including a right to offset)	ome Equity	y Loan		
Para talka ana tan	Opened 09/16 Last Active		9655			
Date debt was incur	rred 12/07/18	Last 4 digits of account number		<u> </u>		
Lincoln Au Financial S		Describe the property that secures the	claim:	\$13,525.00	Unknown	Unknown
Creditor's Name		Lease				
Attn: Bank Po Box 542		As of the date you file, the claim is: Che	ck all that			
Omaha, NE		apply. Contingent				
	City, State & Zip Code	☐ Unliquidated				
Who ower the deb	42 Ob It	Disputed				
Who owes the deb	A: Check one.	Nature of lien. Check all that apply. ☐ An agreement you made (such as more than a more	tanae er ees:	rod		
Debtor 1 only		car loan)	iyaye oi secu	ieu		
☐ Debtor 2 only ☐ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mecha	nic's lien\			
	e debtors and another	☐ Judgment lien from a lawsuit	1110 3 11011)			
Official Form 106D		Schedule D: Creditors Who Have C	laims Secu	red by Property		page 1 of

Debtor 1 Joseph B	Klepka, Jr		Case	number (if known)		
First Name	Middle Na	ime Last Name	_			
Debtor 2 Regina L I			_			
First Name	Middle Na	me Last Name				
☐ Check if this claim re	elates to a	Other (including a right to offset)	Automobile Le	ase		
Date debt was incurred	Opened 01/18 Last Active 12/18	Last 4 digits of account num	ber <u>0904</u>			
2.3 Ocwen Loan S	Servicina	Describe the property that secures	the claim:	\$86,843.00	\$112,172.00	\$0.00
Creditor's Name Attn: Research/Ban 1661 Worthing Ste 100 West Palm Be	kruptcy gton Rd	201 Paris Avenue Brooklaw 08030 Camden County Market Value \$112,172.00 m 10% cost of sale = \$100,954 As of the date you file, the claim is: apply. ☐ Contingent	inus .80	<u></u>	, 22	, , , ,
Number, Street, City, S Who owes the debt? C		☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as car loan)	mortgage or secured			
■ Debtor 1 and Debtor 2	? only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
☐ At least one of the deb	=	☐ Judgment lien from a lawsuit				
☐ Check if this claim re community debt		Other (including a right to offset)	Mortgage			
Date debt was incurred	Opened 11/12 Last Active 11/28/18	Last 4 digits of account num	ber <u>7958</u>			
	of your form, add t	olumn A on this page. Write that num the dollar value totals from all pages.		\$108,382. \$108,382.		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in thi	is information to identify your	case:			
Debtor 1	Joseph B Klepka,	lr.			
Dobto: 1	First Name	Middle Name	Last Name		
Debtor 2	Regina L Klepka				
(Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	′		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	I Form 106E/F				
	lule E/F: Creditors W	ho Have Unsecure	d Claime		12/15
				2. 4.0.6	PRIORITY claims. List the other party
left. Attach		e. If you have no information to r			number the entries in the boxes on the op of any additional pages, write your
	y creditors have priority unsecure				
_	o. Go to Part 2.	a ciamic agamet year			
☐ Ye					
	s. List All of Your NONPRIORIT	V Unequired Claims			
_	y creditors have nonpriority unsec				
⊔ No	b. You have nothing to report in this p	art. Submit this form to the court wit	th your other sche	edules.	
■ Ye	9S.				
unsec	one creditor holds a particular claim, li	for each claim. For each claim liste	ed, identify what t	ype of claim it is. Do not list cla	or has more than one nonpriority ims already included in Part 1. If more aims fill out the Continuation Page of
					Total claim
4.1	Chase Card Services	Last 4 digits of a	ccount number	5070	\$7,076.00
	Ionpriority Creditor's Name				
	Correspondence Dept			Opened 08/06 Last A	ctive
	Po Box 15298 Vilmington, DE 19850	When was the de	bt incurred?	08/18	
_	lumber Street City State Zip Code	As of the date you	u file, the claim i	s: Check all that apply	
V	Who incurred the debt? Check one.	-			
[Debtor 1 only	☐ Contingent			
[Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
[At least one of the debtors and and	other Type of NONPRIC	ORITY unsecure	d claim:	
_	☐ Check if this claim is for a comm	П оынын I			
d	lebt	☐ Obligations aris	•	ration agreement or divorce that	at you did not
_	s the claim subject to offset?	report as priority cl			
	No			g plans, and other similar debts	;
	☐ Yes	Other. Specify	Credit Card		

Debtor Debtor	1 Joseph B Klepka, Jr 2 Regina L Klepka		Case number (if known)		
4.2	Citibank/Best Buy Nonpriority Creditor's Name	Last 4 digits of account number	9958	\$12,535.00	
	Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179	When was the debt incurred?	Opened 7/26/08 Last Active 5/17/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing			
	Yes	Other. Specify Charge Acc	count		
4.3	Citibank/Goodyear Nonpriority Creditor's Name	Last 4 digits of account number	6725	\$2,060.00	
	Citibank Corp/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 02/17 Last Active 06/18		
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing			
	Yes	☐ Yes ☐ Other. Specify Charge Account			
4.4	Citibank/The Home Depot Nonpriority Creditor's Name	Last 4 digits of account number	8265	\$10,601.00	
	Attn: Recovery/Centralized Bankruptcy Po Box 790034	When was the debt incurred?	Opened 11/11 Last Active 06/18		
	St Louis, MO 63179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other, Specify Charge Acceptage	count		

Debto	r 2 Regina L Klepka		Case number (if known)				
4.5	Citicards Cbna	Last 4 digits of account number	7059	\$16,038.00			
	Nonpriority Creditor's Name	_	One and OF/AC Least Active				
	Citi Bank Po Box 6077	When was the debt incurred?	Opened 05/16 Last Active 05/18				
	Sioux Falls, SD 57117	when was the dept incurred:	03/16				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	_	☐ Student loans					
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	mation agreement or divorce that you did not				
	■ No	ng plans, and other similar debts					
	Yes	Other. Specify Credit Card	1				
4.6	Comonity Pank/Torrid	Last 4 digits of account number	5796	\$466.00			
4.0	Comenity Bank/Torrid Nonpriority Creditor's Name	Last 4 digits of account number	5786	\$400.00			
	Attn: Bankruptcy Dept		Opened 05/18 Last Active				
	Po Box 182125	When was the debt incurred?	1/12/19				
	Columbus, OH 43218						
	Number Street City State Zip Code	is: Check all that apply					
	Who incurred the debt? Check one.	_					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	d claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	Yes	■ Other. Specify Charge Acc	count				
4.7	Comenity Bank/Victoria Secret	Last 4 digits of account number	6245	\$1,792.00			
	Nonpriority Creditor's Name	-		. ,			
	Attn: Bankruptcy Dept		Opened 06/15 Last Active				
	Po Box 182125	When was the debt incurred?	06/18				
	Columbus, OH 45318 Number Street City State Zip Code	As of the date you file, the claim					
	Who incurred the debt? Check one.	c you mo, mo olum	Chook an that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Chudant lagge					
	☐ Check if this claim is for a community	_					
	debt	Obligations arising out of a sepa	eration agreement or divorce that you did not				

■ No

☐ Yes

■ Other. Specify Charge Account

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

	r 1 Joseph B Klepka, Jr r 2 Regina L Klepka		Case number (_{if known})				
4.8	Comenity Capital/mprc Nonpriority Creditor's Name	Last 4 digits of account number	2612	\$896.00			
	Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 10/15 Last Active 07/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i					
	☐ Debtor 1 only ■ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
		☐ Student loans	. Juli				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Charge Acc					
4.9	Comenitycapital/boscov Nonpriority Creditor's Name	Last 4 digits of account number	8590	\$2,579.00			
	Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 09/15 Last Active 06/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only						
	■ Debtor 2 only	☐ Contingent☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.1	Energy People Fcu Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$12,746.00			
	Po Box 279 Medford, NJ 08055	When was the debt incurred?	Opened 05/18 Last Active 12/26/18				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only						
	☐ Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another						
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa					
	Is the claim subject to offset?	report as priority claims	and the second of the second o				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	□Yes	■ Other. Specify Secured					

or 2 Regina L Klepka		Case number (if known)							
Energy People Fcu	Last 4 digits of account number	0003	\$1,123.00						
Nonpriority Creditor's Name Po Box 279 Medford, NJ 08055	When was the debt incurred?	Opened 05/18 Last Active 12/26/18							
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i								
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated	_							
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:							
\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not							
Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharin	ng plans, and other similar debts							
Yes	Other. Specify Secured								
Energy People Fcu Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$14,378.00						
Po Box 279 Medford, NJ 08055	When was the debt incurred?	Opened 11/17 Last Active 1/10/18							
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i								
Debtor 1 only	☐ Contingent								
Debtor 2 only	☐ Unliquidated								
☐ Debtor 1 and Debtor 2 only	☐ Disputed								
☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured ☐ Student loans	d claim:							
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims								
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts							
Yes	Other. Specify Unsecured								
Energy People Fcu	Last 4 digits of account number	0003	\$2,632.0						
Nonpriority Creditor's Name Po Box 279 Medford, NJ 08055	When was the debt incurred?	Opened 11/17 Last Active 1/10/18							
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply							
Debtor 1 only	☐ Contingent								
Debtor 2 only	☐ Unliquidated								
☐ Debtor 1 and Debtor 2 only	☐ Disputed								
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:							
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not							
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts							
■ No									

Last 4 digits of account number	8903	\$1,454.00		
When was the debt incurred?	Opened 10/15 Last Active 06/18			
As of the date you file, the claim i				
_				
'				
	d claim:			
☐ Student loans				
☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
Debts to pension or profit-sharin	ng plans, and other similar debts			
Other. Specify Charge Acc	count			
l ast 4 digits of account number	1410	\$2,435.0		
	Opened 07/14 Last Active			
When was the debt incurred?	06/18			
As of the date you file, the claim is: Check all that apply				
☐ Contingent				
☐ Unliquidated				
☐ Disputed				
<u></u>	d claim:			
☐ Obligations arising out of a sepa	aration agreement or divorce that you did not			
<u> </u>				
Last 4 digits of account number		\$912.0		
When was the debt incurred?	Opened 06/17 Last Active 05/18			
As of the date you file, the claim i	is: Check all that apply			
☐ Contingent				
☐ Unliquidated				
☐ Disputed				
Type of NONPRIORITY unsecured				
report as priority claims				
	= -			
Charma Ass				
	When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecurer Student loans Debts to pension or profit-sharin Other. Specify Charge Acc Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecurer Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin Other. Specify Credit Carc Last 4 digits of account number When was the debt incurred? As of the date you file, the claim Contingent Unliquidated Disputed Type of NONPRIORITY unsecurer Student loans Contingent Unliquidated Disputed Type of NONPRIORITY unsecurer Student loans Obligations arising out of a separeport as priority claims Contingent Unliquidated Disputed Type of NONPRIORITY unsecurer Student loans Obligations arising out of a separeport as priority claims Debts to pension or profit-sharin	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Charge Account Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Cother. Specify Charge Account Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Opened 06/17 Last Active 06/18 As of the date you file, the claim is: Check all that apply Credit Card Last 4 digits of account number Opened 06/17 Last Active 05/18 As of the date you file, the claim is: Check all that apply Credit Card Last 4 digits of account number Opened 06/17 Last Active 05/18 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not obligations arising out of a separation agreement or divorce that you did not obligations arising out of a separation agreement or divorce that you did not obligations arising out of a separation agreement or divorce that you did not obligations arising out of a separation agreement or divorce that you did not		

Synchrony Bank/Lowes	Last 4 digits of account number	2316	\$2,439.00		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	Opened 08/17 Last Active 05/18				
Orlando, FL 32896 Number Street City State Zip Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply			
Who incurred the debt? Check one.	7.5 of the date you me, the claim.	or one on an anat appry			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Charge Acc	count			
Synchrony Bank/Old Navy	Last 4 digits of account number	3215	\$8,342.00		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 11/12 Last Active 06/18			
Orlando, FL 32896 lumber Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i claim:			
☐ Check if this claim is for a community		ration agreement or divorce that you did not			
s the claim subject to offset?	report as priority claims	ration agreement of divorce that you did not			
No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	Other. Specify Credit Card	<u> </u>			
Synchrony Bank/QVC	Last 4 digits of account number	4899	\$1,007.00		
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 12/15 Last Active 06/18			
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
Debtor 1 only	O continuent				
■ Debtor 2 only	☐ Contingent☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims				
No	Debts to pension or profit-sharin	g plans, and other similar debts			
☐ Yes	■ Other. Specify Charge Acc				

ebtor 1 Joseph B Klepka, Jr ebtor 2 Regina L Klepka		Case number (if known)						
Synchrony Bank/TJX	Last 4 digits of account number	5534	\$827.0					
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 04/16 Last Active 06/18						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim							
☐ Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
☐ Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
Yes	Other. Specify Charge Acc	count						
Synchrony Bank/Walmart	Last 4 digits of account number	0281	\$940.0					
Nonpriority Creditor's Name			***************************************					
Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	Opened 01/18 Last Active 06/18						
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim							
Debtor 1 only	☐ Contingent							
Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:						
☐ Check if this claim is for a community	☐ Student loans							
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts						
Yes	Other. Specify Charge Acc	count						
Synchrony Bank/Walmart	Last 4 digits of account number	6222	\$2,961.0					
Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 01/15 Last Active 06/18						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
☐ Debtor 1 only	☐ Contingent							
■ Debtor 2 only	☐ Unliquidated							
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed							
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
☐ Check if this claim is for a community	Student loans							
debt		aration agreement or divorce that you did not						
Is the claim subject to offset?	report as priority claims							
No	Debts to pension or profit-sharing	•						
☐ Yes	■ Other. Specify Credit Card	i						

	or 1 Joseph B Klepka, Jr or 2 Regina L Klepka		Case number (if known)					
4.2 3	Target	Last 4 digits of account number	0835	\$2,587.00				
	Nonpriority Creditor's Name Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440	When was the debt incurred?	Opened 08/13 Last Active 06/18					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	Debtor 1 and Debtor 2 only	☐ Disputed						
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	Debts to pension or profit-sharin						
	☐ Yes	Other. Specify Credit Card	<u> </u>					
4.2 4	Target Nonpriority Creditor's Name	Last 4 digits of account number	6430	\$1,402.00				
	Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440	When was the debt incurred?	Opened 12/17 Last Active 05/18					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not					
	No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Credit Card	<u> </u>					
4.2 5	TD Bank, N.A. Nonpriority Creditor's Name	Last 4 digits of account number	7796	\$9,784.00				
	32 Chestnut Street Po Box 1377 Lewiston, ME 04243	When was the debt incurred?	Opened 11/16 Last Active 07/18					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i						
	Debtor 1 only	☐ Contingent						
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims						
	■ No	☐ Debts to pension or profit-sharin						
	☐ Yes	Yes Other Specify Credit Card						

	ity Federa		Last 4 digits of account number	2960	3		\$351.0	
Nonp	priority Cred	itor's Name	-	One	ned 02/18	Last Active		
			When was the debt incurred?	12/18				
Number Street City State Zip Code Who incurred the debt? Check one.			As of the date you file, the claim	is: Chec	k all that apply	,		
■ D	Debtor 1 only	/	☐ Contingent					
□ D	Debtor 2 only	1	☐ Unliquidated					
□ D	Debtor 1 and	Debtor 2 only	☐ Disputed					
□ A	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
☐ C debt		claim is for a community	Student loans					
		eject to offset?	Obligations arising out of a sep report as priority claims	aration a	greement or div	vorce that you did not		
■ N		•	Debts to pension or profit-shari	ing plans,	and other simi	ilar debts		
□ Y			Other. Specify Unsecured					
			— Other. Opeony					
Furi	niture	/Bob's Discount	Last 4 digits of account number	0345	i		\$4,352.0	
	priority Cred n: Bankru			Ope	ned 03/16	Last Active		
	Box 1043		When was the debt incurred?	06/1				
		, IA 50306	. As of the data you file the claim	in Ohra	l. = 4 4 .			
	Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.							
_	Debtor 1 only		☐ Contingent					
	Debtor 2 only		☐ Unliquidated					
_	•	Debtor 2 only	☐ Disputed					
_		of the debtors and another	Type of NONPRIORITY unsecure	ed claim:				
		s claim is for a community	☐ Student loans					
debt	t	•	☐ Obligations arising out of a separation agreement or divorce that you did not					
Is the	e claim sub	eject to offset?	report as priority claims					
■ N	No		☐ Debts to pension or profit-sharing plans, and other similar debts					
☐ Y	⁄es		Other. Specify Charge Ac	count				
		to Be Notified About a Deb						
ying to e more t	collect from	n you for a debt you owe to son	out your bankruptcy, for a debt that neone else, list the original creditor i you listed in Parts 1 or 2, list the add submit this page.	n Parts 1	or 2, then list	t the collection agency here	e. Similarly, if you	
and Add			n which entry in Part 1 or Part 2 did yo		-			
	ugherty a er Dr. Sui			_		Priority Unsecured Claims		
Box 1269		· • •		■ Part 2:	Creditors with	Nonpriority Unsecured Claim	is	
nt Lau	urel, NJ 0							
		L	ast 4 digits of account number					
4: A	dd the An	nounts for Each Type of Uns	ecured Claim					
	mounts of c secured clai		s. This information is for statistical	reporting	purposes on	nly. 28 U.S.C. §159. Add the	amounts for each	
	^	Demostic comment of the ed		0.		Total Claim		
Total	6a.	Domestic support obligations		6a.	\$	0.00		
claims	21	- .		C 1	_			
Part 1	6b.	Taxes and certain other debts	=	6b.	\$	0.00		
	6c.	Claims for death or personal in	jury while you were intovicated	6c.	\$	0.00		

Debtor 1 **Joseph B Klepka, Jr** Debtor 2 **Regina L Klepka**

Case number (if known)

	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. 6i.	Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount	6h. 6i.	\$ \$	0.00 124,715.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	124,715.00

Fill in this information to identify your case:					
Debtor 1	Joseph B Klepka,	Jr			
	First Name	Middle Name	Last Name		
Debtor 2	Regina L Klepka				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ban	kruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number (if known)				☐ Check if this is an amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Lincoln Automotive Financial Service Attn: Bankruptcy Po Box 542000 Omaha, NE 68154	Acct# 55920904 Opened Opened 01/18 Last Active 12/18 Automobile Lease Lease

Fill in this	s information to identify your	case:			
Debtor 1	Joseph B Klepka	, Jr			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fil	ing) Regina L Klepka First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	DISTRICT OF NEW J	IERSEY		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
1. Do	e and case number (if known you have any codebtors? (If	•		as a codebtor.	
■ No □ Ye					
	thin the last 8 years, have yona, California, Idaho, Louisiana				states and territories include
	. Go to line 3. s. Did your spouse, former spo	use, or legal equivalent l	ive with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guar	antor or cosigner. Make s	ure you have listed th	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	}
	Name			☐ Schedule E/F, lii	
				☐ Schedule G, line	·
	Number Street City	State	ZIP Code	-	
3.2				☐ Schedule D, line	
J.Z	Name			☐ Schedule E/F, lii	ne
				☐ Schedule G, line	·
	Number Street	State	ZIP Code	=	

E:II	in this information to identify, your					l			
	in this information to identify your optor 1 Joseph B k								
	otor 2 Regina L K				_				
	ted States Bankruptcy Court for th	e: DISTRICT OF NEW J	ERSEY						
(If kr	se number						d filing ent showir	ng postpetition cha	apter
	fficial Form 106l					MM / DD/ Y	YYY		
	chedule I: Your Inc								12/15
sup spo atta	as complete and accurate as posplying correct information. If you use. If you are separated and you have separated sheet to this form. The describe Employment	u are married and not fili ur spouse is not filing w . On the top of any additi	ng jointly, and your sith you, do not include	spouse de infor	is liv matio	ing with you, incluen about your spo	ude infor ouse. If m	mation about you ore space is nee	ur ded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-f	filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed			■ Emplo	oyed		
		_mproyment etatae	☐ Not employed			☐ Not e	☐ Not employed		
		Occupation	Operator			Daycard	e Worke	er	
	Include part-time, seasonal, or self-employed work.	Employer's name	PSE&G			West D	eptford	Township	
	Occupation may include student or homemaker, if it applies.	Employer's address	80 Park Plaza Newark, NJ 071	02		400 Cro West De		nt Road NJ 08086	
		How long employed t	here?						_
Par	t 2: Give Details About Mo	onthly Income							
	mate monthly income as of the cuse unless you are separated.	date you file this form. If	you have nothing to re	eport for	any l	ine, write \$0 in the	space. In	nclude your non-fili	ng
	u or your non-filing spouse have n e space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for that perso	n on the l	lines below. If you	need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly.			2.	\$	12,198.82	\$	251.75	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	0.00	

12,198.82

251.75

Calculate gross Income. Add line 2 + line 3.

Debtor 1 Debtor 2 Joseph B Klepka, Jr Regina L Klepka

Case number (if known)

				For	Debtor 1		r Debtor 2 or n-filing spouse	
	Copy	/ line 4 here	4.	\$	12,198.82	\$	251.75	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	3,997.35	\$	46.48	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	62.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	350.19	\$	0.00	
	5e.	Insurance	5e.	\$_	566.14	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g.	Union dues	5g.	\$_	69.72	\$-	0.00	
	5h.	Other deductions. Specify: Energy People CU	5h.⊣	. —		- \$ [−]	0.00	
	JII.	Unity Federal CU		ς Ψ <u> </u>	731.54	- Ψ - \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$ \$	6,558.08	\$ \$	46.48	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,640.74	\$	205.27	
			۲.	Ψ	5,040.74	Ψ_	205.21	
8.	List a	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$_	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$_	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		¢	0.00	¢.	0.00	
	04	settlement, and property settlement.	8c.	\$_	0.00	\$_	0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$_	0.00	
	8e.	Social Security	8e.	\$	0.00	\$_	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify: 2018 Proportionate Tax Refund	8h.+	+ \$_	804.83	+ \$ _	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	804.83	\$_	0.00	
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		6,445.57 + \$		205.27 = \$	6,650.84
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	. U. Ф		U,445.51 T V _			0,030.04
11.	State Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a second contribution.	depen					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	6,650.84
13.	Do y	ou expect an increase or decrease within the year after you file this form	?				Combin monthly	ed / income
		No.						
		Yes. Explain:						

Fill	in this information to identify y	our case:					
Deb	otor 1 Joseph B K	lepka, Jr			Checl	k if this is:	
	exter 2 Regina L Klouse, if filing)	epka				An amended filing A supplement shov 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for th	e: DISTR	ICT OF NEW JERSEY		<u> </u>	MM / DD / YYYY	
Cas	se number						
	nown)						
	fficial Form 106J						
	chedule J: Your						12/15
info	as complete and accurate a ormation. If more space is n mber (if known). Answer eve	eeded, atta	ach another sheet to this				
Par 1.	Describe Your Hous Is this a joint case?	ehold					
	☐ No. Go to line 2.						
	Yes. Does Debtor 2 live	in a sepa	rate household?				
	■ No □ Yes. Debtor 2 mu	ust file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents?	□No					
	Do not list Debtor 1 and Debtor 2.	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.			Son		8	Yes
				Son		13	□ No ■ Yes
							■ Yes □ No
							☐ Yes
							□ No
3.	Do your expenses include		I _{No}				☐ Yes
	expenses of people other yourself and your dependent		l Yes				
Est	Estimate Your Ongo timate your expenses as of your expenses as of a date after the	our bankı	uptcy filing date unless y				
	olicable date.		.,		, oo		
Inc	lude expenses paid for with	non-cash	government assistance i	f you know			
	value of such assistance a ficial Form 106l.)	nd have in	cluded it on <i>Schedule I:</i> \	our Income		Your expe	enses
4.	The rental or home owner payments and any rent for the			nclude first mortgag	e 4. \$		962.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner	's, or rente	r's insurance		4a. \$		0.00
	4c. Home maintenance, r	epair, and	upkeep expenses		4c. \$		200.00
F	4d. Homeowner's associa			mo oquity locas	4d. \$		0.00
5.	Additional mortgage payn	ents for y	our residence, such as ho	me equity loans	5. \$		104.00

otor 1 otor 2	Joseph Regina L	B Klepka, Jr ₋ Klepka	Case num	ber (if known)	
[]4:11			_		
Utili 6a.		, heat, natural gas	6a.	\$	300.00
6b.	-	wer, garbage collection	6b.	·	80.00
6c.		e, cell phone, Internet, satellite, and cable services	6c.		525.00
6d.	Other. Spe		6d.	\$	0.00
		ekeeping supplies	7.	·	1,220.00
		children's education costs	8.	\$	0.00
_		ry, and dry cleaning	9.	·	325.00
	•	products and services	10.	· : ———	300.00
		ntal expenses	11.	·	400.00
		Include gas, maintenance, bus or train fare.		Ψ	400.00
		ar payments.	12.	\$	350.00
		clubs, recreation, newspapers, magazines, and be	ooks 13.	\$	200.00
		ributions and religious donations	14.	· -	50.00
	rance.		17.	Ť	00.00
		nsurance deducted from your pay or included in lines	4 or 20.		
	Life insura		15a.	\$	0.00
	Health ins		15b.	·	0.00
	Vehicle in		15c.	·	200.00
		rance. Specify:	15d.	·	0.00
		nclude taxes deducted from your pay or included in lin		–	0.00
Spec	cify:		16.	\$	0.00
		ease payments:	170	¢	E44.00
		ents for Vehicle 1	17a.	·	541.00
		ents for Vehicle 2	17b.	·	0.00
	Other. Spe		17c.	·	0.00
	Other. Spe		17d.	\$	0.00
		of alimony, maintenance, and support that you di your pay on line 5, Schedule I, Your Income (Offic		\$	0.00
		s you make to support others who do not live with		\$	0.00
Spec			19.		
		erty expenses not included in lines 4 or 5 of this f	orm or on Schedule I: Yo	our Income.	
20a.	Mortgages	s on other property	20a.	\$	0.00
20b.	Real estat	te taxes	20b.	\$	0.00
20c.	Property,	homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeown	er's association or condominium dues	20e.	\$	0.00
Othe	er: Specify:		21.	+\$	0.00
		monthly expenses		Ψ	0.00
	-	through 21.		\$	5,757.00
		2 (monthly expenses for Debtor 2), if any, from Officia	l Form 106.I-2	\$	3,131.00
			1 Offil 1000-Z	· -	F 7FF 00
22c.	Add line 22	a and 22b. The result is your monthly expenses.		\$	5,757.00
Calc	ulate your	monthly net income.			
23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	6,650.84
		monthly expenses from line 22c above.	23b.	-\$	5,757.00
		•			
23c.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	893.84
For e	xample, do yo fication to the	an increase or decrease in your expenses within to but expect to finish paying for your car loan within the year or terms of your mortgage?			rease or decrease because of a
■ N	lo.				
\square Y	es.	Explain here:			

Fill in th	nis informa	ation to identify your o	ase:					
Debtor 1								
Debioi i	•	Joseph B Klepka, First Name	Middle Name	Las	t Name			
Debtor 2	2	Regina L Klepka						
(Spouse if,	filing)	First Name	Middle Name	Las	t Name			
United S	States Bank	cruptcy Court for the:	DISTRICT OF NEW JERSEY	′				
Case nu	ımber							
(if known)								Check if this is an amended filing
		106Dec on About a	n Individual De	ebt	or's Sche	dules		12/15
obtainin	g money o	or property by fraud in U.S.C. §§ 152, 1341, 19	e bankruptcy schedules or a connection with a bankrupt 519, and 3571.					
Dic	d you pay o	or agree to pay some	one who is NOT an attorney t	to help	you fill out bankru	ptcy forms?		
	No							
	Yes. Na	me of person					, ,	tition Preparer's Notice, ature (Official Form 119)
		of perjury, I declare true and correct.	hat I have read the summary	and s	chedules filed with	this declarat	ion and	
Х	/s/ .loser	oh B Klepka, Jr		Х	/s/ Regina L Kle	nka		
		B Klepka, Jr			Regina L Klepka			
		of Debtor 1			Signature of Debto			
	Date Fe	bruary 8, 2019	_		Date February	8, 2019		

===	in this inform	nation to identify you	r case.			
	otor 1					
Der	OLOT 1	Joseph B Klepka First Name	Middle Name	Last Name		
Deb	otor 2	Regina L Klepka	1			
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY		
Cas	se number					
(if kn	own)				_	heck if this is an mended filing
~ .	<i></i>	407				
	<u>ficial Fo</u>		Affaira far Indivis	duele Filipe for D		
			Affairs for Individ			4/16
info	rmation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
		,	rital Status and Where You	ı Lived Before		
1.	What is you	r current marital statu	ıs?			
	MarriedNot main					
2.	During the I	ast 3 vears, have you	lived anywhere other than	where you live now?		
	_	,,				
	■ No □ Yes. Lis	at all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory	
	-				-	ŕ
	■ No □ Yes Ma	ake sure vou fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H)		
		and date you iiii out oor	icadic 11. Tour Codebiors (C	modificant room.		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?
	□ No					
		I in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

Debtor Debtor		seph B Kl egina L Kle			Cas	e number (if known)	
				Debtor 1		Debtor 2	
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		dar year: December	31, 2018)	■ Wages, commissions, bonuses, tips	\$123,843.28	☐ Wages, commissions, bonuses, tips	\$2,576.04
				☐ Operating a business		☐ Operating a business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$121,246.00	☐ Wages, commissions, bonuses, tips	\$0.00
				☐ Operating a business		☐ Operating a business	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
					exclusions)		
Part 3:	Lis	t Certain Pa	yments You	u Made Before You Filed for	Bankruptcy		
6. Ar □		Neither De	ebtor 1 nor	2's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U.S.C. § 1	01(8) as "incurred by ar
				ore you filed for bankruptcy, c	did you pay any creditor a tota	l of \$6,425* or more?	
		□ _{No.} □ _{Yes}	Go to line		aid a tatal of #C 405* an array		the total amount
		. 00	paid that o	each creditor to whom you pa reditor. Do not include payme e payments to an attorney for	ents for domestic support obliques this bankruptcy case.	ations, such as child support	and alimony. Also, do
_				nt on 4/01/19 and every 3 yea		or after the date of adjustmen	ıt.
-	Yes.			or both have primarily cons ore you filed for bankruptcy, c		I of \$600 or more?	
		■ No.	Go to line	7.			
		□ Yes	List below include pa	each creditor to whom you pa yments for domestic support or this bankruptcy case			

Dates of payment

Total amount paid

Amount you still owe

Creditor's Name and Address

Was this payment for ...

Deb	tor 2	Regina L Klepka			Cas	e number (if know	n)	
7.	Inside of wh	in 1 year before you filed for bankruptoers include your relatives; any general paich you are an officer, director, person in siness you operate as a sole proprietor. 1 my.	rtner cont	s; relatives of any ger rol, or owner of 20%	neral partners; partne or more of their voting	erships of which g g securities; and	you are a genera any managing a	al partner; corporations gent, including one fo
	_	No Yes. List all payments to an insider.						
	Insid	der's Name and Address	Da	tes of payment	Total amount paid	Amount you still owe		this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos			yments or transfer a	iny property on	account of a d	ebt that benefited an
	_	No Yes. List all payments to an insider						
	Insid	der's Name and Address	Da	tes of payment	Total amount paid	Amount you still owe		this payment litor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, aı	nd Foreclosures				
9.	List a	in 1 year before you filed for bankrupte Ill such matters, including personal injury fications, and contract disputes.						
	_	No Yes. Fill in the details.						
		e title e number	Na	ture of the case	Court or agency		Status of th	ne case
10.		in 1 year before you filed for bankrupt k all that apply and fill in the details below		as any of your prop	erty repossessed, f	oreclosed, garr	nished, attached	d, seized, or levied?
	_	No. Go to line 11. Yes. Fill in the information below.						
	Cred	ditor Name and Address		scribe the Property	d	Dat	e	Value of the property
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.	otcy,	did any creditor, inc		nancial institutio	on, set off any a	amounts from your
	Cred	ditor Name and Address	De	scribe the action th	e creditor took	Dat tak	e action was en	Amount
12.		in 1 year before you filed for bankrupt t-appointed receiver, a custodian, or a			erty in the possessi	ion of an assigr	nee for the bene	efit of creditors, a
		No Yes						
Par	t 5:	List Certain Gifts and Contributions						
13.		in 2 years before you filed for bankrup	tcy, (did you give any gif	ts with a total value	of more than \$6	600 per person	?
	Gifts	Yes. Fill in the details for each gift. s with a total value of more than \$600 person		Describe the gifts			es you gave gifts	Value
		son to Whom You Gave the Gift and						

Debtor 1 Joseph B Klepka, Jr

	otor 1 Joseph B Klepka, Jr otor 2 Regina L Klepka		Ca	ise number (if known)	
14.	Within 2 years before you filed for band No Yes. Fill in the details for each gift or			with a total	l value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bank or gambling?	ruptcy or	since you filed for bankruptcy, did yo	u lose anytl	hing because of the	it, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the lose the amount that insurance has paid. List the claims on line 33 of Schedule A/B: Plant 1	t pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfe	ers				
	Within 1 year before you filed for banks consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition. No Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Sadek and Cooper 1315 Walnut Street Suite 502 Philadelphia, PA 19107 brad@sadeklaw.com	r preparir n preparers	ng a bankruptcy petition?	ces required		Amount of payment \$2,300.00
	Within 1 year before you filed for bank promised to help you deal with your cr Do not include any payment or transfer the	editors o	r to make payments to your creditors?		r transfer any prope	rty to anyone who
	Yes. Fill in the details. Person Who Was Paid		Description and value of any proper	tv	Date payment	Amount of
	Address		transferred	.,	or transfer was	payment
	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second with the work of th	our busin ers made a	ess or financial affairs? as security (such as the granting of a sec			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts	Date transfer was made
	Person's relationship to you			paid in exc		

Debtor 1	Joseph B Klepka, Jr
Debtor 2	Regina L Klepka

Case number (if known)

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		y property to a	self-settle	ed trust or similar device o	of which you are a
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and St	orage Uni	ts	
20.	Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or c houses, pension funds, cooperatives, associated No ■ Yes. Fill in the details.	other financial accour	nts; certificates	of deposi		
		ast 4 digits of ccount number	Type of according trument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de	posit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1	year befo	re you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe	the contents	Do you still have it?
Par	19: Identify Property You Hold or Control for	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any proper	ty you bor	rowed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surface	water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa		environmental	law, wheth	ner you now own, operate	, or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardous	waste, ha	zardous substance, toxic	substance,

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24.	Has any governmental unit notified you that yo 	ou may be liable or potentially liab	le und	er or in violation of an environme	ntal law?
	■ No				
	Yes. Fill in the details.				5
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	istrative proceeding under any en	vironn	nental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case
Par	11: Give Details About Your Business or Co	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	, did you own a business or have a	any of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	y, eithe	er full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	hip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	utive of a corporation			
	☐ An owner of at least 5% of the voting o	or equity securities of a corporation	n		
	No. None of the above applies. Go to Par	t 12.			
	Yes. Check all that apply above and fill in	the details below for each busines	ss.		
		escribe the nature of the business	3	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	ame of accountant or bookkeeper		Do not include Social Security no Dates business existed	lumber or IIIN.
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	, did you give a financial statemen	t to an		de all financial
	No				
	Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	ate Issued			

Debtor 1	Joseph B Klepka	a, Jr		
Debtor 2	Regina L Klepka	ı	Case number (if k	nown)
Part 12:	Sign Below			
I la avec ma a		in Otatamant of Financial Affairs		war alter of manisms that the amount
			nd any attachments, and I declare under t, concealing property, or obtaining mon	
			prisonment for up to 20 years, or both.	cy or property by made in connection
	§§ 152, 1341, 1519, a		,	
	1.5.1/111			
	ph B Klepka, Jr		egina L Klepka	
•	B Klepka, Jr		na L Klepka	
Signatur	e of Debtor 1	Signa	ture of Debtor 2	
Date F	ebruary 8, 2019	Date	February 8, 2019	<u> </u>
Did you a	ttach additional page	es to Your Statement of Financial	Affairs for Individuals Filing for Bankrup	otcy (Official Form 107)?
■ No				
☐ Yes				
Did you p	ay or agree to pay so	omeone who is not an attorney to	help you fill out bankruptcy forms?	
■ No				
□ Yes N	ame of Person	Attach the Bankruntcy Petition Pre	narer's Notice Declaration and Signature	(Official Form 119)

Fill in this inform	nation to identify your case:
Debtor 1	Joseph B Klepka, Jr
Debtor 2 (Spouse, if filing)	Regina L Klepka
United States B	Sankruptcy Court for the: District of New Jersey
Case number	

Check	as directed in lines 17 and 21:
l .	cording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - ☐ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colun Debto		Deb	umn B tor 2 or -filing spouse
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and c	ommissi	ons (before all	\$	189.44	\$	12,198.82
Alimony and maintenance payments. Do not include Column B is filled in.	de paym	ents from	a spouse if	\$	0.00	\$	0.00
All amounts from any source which are regularly of you or your dependents, including child support on an unmarried partner, members of your househind roommates. Do not include payments from a spoou listed on line 3. Let income from operating a business,	o rt. Includ	de regula depende not includ	r contributions nts, parents,	\$	0.00	\$	0.00
rofession, or farm	\$	0.00					
Gross receipts (before all deductions)	Ψ _ ••	0.00					
dinary and necessary operating expenses et monthly income from a business, profession, or f	Ψ – arm \$ _		Copy here ->	\$	0.00	\$	0.00
Net income from rental and other real property	Debto	r 1					
ross receipts (before all deductions)	\$_	0.00					
Ordinary and necessary operating expenses	- \$ _	0.00					
Net monthly income from rental or other real property	, c	0.00	Copy here ->	\$	0.00	\$	0.00

			Column A Debtor 1		Column B Debtor 2 o non-filing	or	
7.	Interest, dividends, and royalties		\$	0.00	\$	0.00	
8.	Unemployment compensation		\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount received was a benefithe Social Security Act. Instead, list it here:	it under					
	For you\$	00					
	For your spouse \$ 0.						
	Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act.		\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specify the source and an Do not include any benefits received under the Social Security Act or paymen received as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page and putotal below.	ts or					
			\$	0.00	\$	0.00	
			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00	
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	189.44	+ \$ _	12,198.82	= \$_	12,388.26
Part						**************************************	12,388.26
13.	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					Ψ	12,300.20
	☐ You are not married. Fill in 0 below.						
	You are married and your spouse is filing with you. Fill in 0 below.						
	☐ You are married and your spouse is not filing with you.						
	Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's						
	Below, specify the basis for excluding this income and the amount of inc adjustments on a separate page.	ome dev	oted to each	n purpos	e. If necessary	/, list add	itional
	If this adjustment does not apply, enter 0 below.	¢					
		\$ \$		_			
		+\$					
	Total	\$	0.0	<u> </u>	opy here=>		0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$	12,388.26
15.							12 200 26
	15a. Copy line 14 here=>					\$	12,388.26
	Multiply line 15a by 12 (the number of months in a year).					X	12
	15b. The result is your current monthly income for the year for this part of the	ne form.				\$	48,659.12

Debtor 1	Joseph B Klepka, Jr	
	Regina L Klepka	

Case number (if known		

16	Calc	ulate	the median family income that applies to y	ou. Follow these s	teps:			
	16a.	Fill in	the state in which you live.	NJ	_			
	16b.	Fill in	the number of people in your household.	4				
		To fin	the median family income for your state and so d a list of applicable median income amounts ctions for this form. This list may also be avai	, go online using th			\$_	122,474.00
17			e lines compare?		,,			
	17a.		Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N					
	17b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	lation of Your Dis				
Part	3:	Cald	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Copy	y your	total average monthly income from line 1	1		\$		12,388.26
19.	conte	end tha	e marital adjustment if it applies. If you are at calculating the commitment period under 1 acome, copy the amount from line 13.	married, your spou	use is not filing with you, and you			
	19a.	If the	marital adjustment does not apply, fill in 0 on	line 19a.		- \$_		0.00
	19b.	Subtr	act line 19a from line 18.				\$	12,388.26
20.	Calc	ulate	your current monthly income for the year.	Follow these steps	s:			
	20a.	Сору	line 19b				\$_	12,388.26
		Multip	bly by 12 (the number of months in a year).)	c 12
	20b.	The re	esult is your current monthly income for the yo	ear for this part of the	he form		\$_	148,659.12
	20c.	Сору	the median family income for your state and	size of household fi	rom line 16c		\$_	122,474.00
	21.	How	do the lines compare?					
			Line 20b is less than line 20c. Unless otherwis	se ordered by the c	court, on the top of page 1 of this form	, check bo	x 3, 1	The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	less otherwise orde	ered by the court, on the top of page 1	of this for	m, cl	neck box 4, <i>The</i>
Par	4:	Sigi	n Below					
	By si	gning	here, under penalty of perjury I declare that t	he information on th	his statement and in any attachments	is true and	d cor	rect.
X			ph B Klepka, Jr	x	/s/ Regina L Klepka			
			B Klepka, Jr of Debtor 1		Regina L Klepka Signature of Debtor 2			
	-	Feb	ruary 8, 2019		Date February 8, 2019			
		MM ,	/DD /YYYY		MM / DD / YYYY			
	-		ked 17a, do NOT fill out or file Form 122C-2.					
	If you	ı chec	ked 17b, fill out Form 122C-2 and file it with t	his form. On line 39	9 of that form, copy your current mont	hly income	fron	n line 14 above.

Fill in this	information to id	dentify your case:				
Debtor 1	Joseph B	Klepka, Jr				
Debtor 2 (Spouse, if	Regina L I	Klepka				
United Stat	es Bankruptcy Co	ourt for the: District of New	Jersey			
Case numb (if known)	per			☐ Chec	k if this is an amend	led filing
Official For		ulation of Your	Disposable I	ncome		04/10
	nis form, you wil nt Period (Officia	I need your completed copy al Form 122C-1).	y of Chapter 13 Stateme	ent of Your Current Monthly	y Income and Calcula	tion of
space is ne	eded, attach a s	te as possible. If two marrie eparate sheet to this form, I r name and case number (if	nclude the line number			
Part 1:	Calculate Your	Deductions from Your Inco	me			
the ques	stions in lines 6-	rvice (IRS) issues National 15. To find the IRS standard available at the bankruptcy	ds, go online using the			
expense	s if they are highe	ints set out in lines 6-15 regar er than the standards. Do not ct any amounts that you subtr	include any operating ex	penses that you subtracted fi	rom income in lines 5 a	
If your ex	kpenses differ from	m month to month, enter the a	average expense.			
Note: Lir	ne numbers 1-4 aı	re not used in this form. These	e numbers apply to infor	mation required by a similar fo	orm used in chapter 7	cases.
5. The	number of peo	ole used in determining you	r deductions from inco	ome		
plus	s the number of a	people who could be claimed ny additional dependents who in your household.			4	
Nationa	l Standards	You must use the IRS Na	ational Standards to ans	wer the questions in lines 6-7	:	
		other items: Using the number amount for food, clothin		d in line 5 and the IRS Nation	nal \$	1,694.00
7. O ut	-of-pocket healt	h care allowance: Using the	number of people you e	ntered in line 5 and the IRS N	National Standards, fill	in

Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Debtor 1	Joseph B Klepka, Jr
Debtor 2	Regina L Klepka

Case number (if known)

eopie v	who are under 65 years of age					
7a.	Out-of-pocket health care allowance per person	\$	52			
7b.	Number of people who are under 65	X	4			
7c.	Subtotal. Multiply line 7a by line 7b.	\$	208.00	Copy here=>	\$ 208.00	
eople v	who are 65 years of age or older					
7d.	Out-of-pocket health care allowance per person	\$	114			
7e.	Number of people who are 65 or older	X	0			
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	\$ 0.00	

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

- Housing and utilities Insurance and operating expenses
- Housing and utilities Mortgage or rent expenses

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

- Housing and utilities Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses.
- 9. Housing and utilities Mortgage or rent expenses:
 - 9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses.

\$ 1,793.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Average monthly payment			
\$ 104.00			
\$ 885.00			
\$989.00	Copy here=> -\$	989.00	Repeat this amount on line 33a.
	\$80	4.00 Copy	\$ 804.00
	\$ 104.00 \$ 885.00	payment \$ 104.00 \$ 885.00 \$ 989.00 Copy here=> -\$	payment \$ 104.00 \$ 885.00 Copy here=> -\$ 989.00 Copy Copy

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

\$ 0.00

Explain why:

9c.

Debtor 1 Debtor 2	Joseph B Klepka, Jr Regina L Klepka Case number (if known)		
11.	Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating	ng expense.	
	□ 0. Go to line 14.		
	☐ 1. Go to line 12.		
	■ 2 or more. Go to line 12.		
	Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim operating expenses, fill in the <i>Operating Costs</i> that apply for your Census region or metropolitan statistical are		504.00

13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.
 Vehicle 1 Describe Vehicle 1:

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average payment	monthly t
Lincoln Automotive Financial Service	\$	541.00

Total Average Monthly Payment \$ _____ **541.00** | Copy here => -\$ ____ **541.00** | Repeat this amount on line 33b.

13c. Net Vehicle 1 ownership or lease expense

Subtract line 13b from line 13a. if this number is less than \$0, enter \$0.

\$ _____S O.00 Copy net Vehicle 1 expense here => \$ 0.00

Vehicle 2 Describe Vehicle 2: 1997 Chevrolet Trailblazer 89000 miles

- 13d. Ownership or leasing costs using IRS Local Standard.....\$

 0.00
- 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
-NONE-	\$\$

Total average monthly payment \$ 0.00 | Copy here | Cop

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from line 13d. if this number is less than \$0, enter \$0.

\$ 0.00 Copy net Vehicle 2 expense here => \$ 0.00

- 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.
- 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

0.00

0.00

	er Necessary Expenses	In addition to the expentine following IRS category		s listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, so	cial security taxes, and M lowever, if you expect to rom the total monthly amo	edicare taxe receive a tax	s. You may ind refund, you m	nd local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	4,848.66
17.	Involuntary deductions: contributions, union dues,	The total monthly payroll	deductions t	hat your job re	quires, such as retirement		
			ır job, such a	s voluntary 40	01(k) contributions or payroll savings.	\$	69.72
18.	filing together, include pay	ments that you make for your of life insurance on your o	your spouse'	s term life insu	e insurance. If two married people are irance. g spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments administrative agency, suc Do not include payments of	h as spousal or child sup	port paymen	ts.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total mon	thly amount that you pay	for education	that is either	required:		
	as a condition for your	ob, or					
	for your physically or m	entally challenged depen-	dent child if r	no public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total mont Do not include payments f				sitting, daycare, nursery, and preschool.	\$	0.00
22.		Ith and welfare of you or you. Ith and welfare of you or you.	your dependent nt that is mo	ents and that is re than the tota		\$	112.00
23.	Optional telephone and to for you and your depender phone service, to the exterincome, if it is not reimburs. Do not include payments f	elephone services: The nts, such as pagers, call wat necessary for your heal sed by your employer. or basic home telephone,	total monthly vaiting, called Ith and welfa internet and	y amount that ridentification, re or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment abount you previously deducted.	+\$	0.00
24.	Add all of the expenses	allowed under the IRS e	xpense allo	wances.		\$	8,988.38
		ns These are addition	al deduction	s allowed by tl	he Means Test. s listed in lines 6-24.	\$	8,988.38
Add	Add all of the expenses and lines 6 through 23. litional Expense Deduction	ns These are addition Note: Do not including insurance, and healt	nal deduction de any exper th savings a	s allowed by the seallowances count exper			8,988.38
Add	Add all of the expenses and lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disabilinsurance, disability insurance.	ns These are addition Note: Do not including insurance, and healt	nal deduction de any exper th savings a	s allowed by the seallowances count exper	s listed in lines 6-24. ses. The monthly expenses for health		8,988.38
Add	Add all of the expenses and lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance, your dependents.	ns These are addition Note: Do not including insurance, and healt	nal deduction de any exper th savings a accounts that	s allowed by the seallowances ccount expertage tare reasonab	s listed in lines 6-24. ses. The monthly expenses for health		8,988.38
Add	Add all of the expenses and lines 6 through 23. litional Expense Deduction Health insurance, disability insurations your dependents. Health insurance	ns These are addition Note: Do not including insurance, and healt	al deduction de any exper	s allowed by the see allowances ccount expert are reasonab	s listed in lines 6-24. ses. The monthly expenses for health		8,988.38
Add	Add all of the expenses and lines 6 through 23. litional Expense Deduction Health insurance, disability insurance, disability insurance and the company of	ns These are addition Note: Do not including insurance, and healt	al deduction de any exper th savings a accounts that \$	s allowed by the seallowances ccount expert are reasonabed 566.14	s listed in lines 6-24. ses. The monthly expenses for health		566.14
Add	Add all of the expenses and lines 6 through 23. Ilitional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ns These are addition Note: Do not includity insurance, and healt nce, and health savings a	al deduction de any experth savings a accounts that	s allowed by the seallowances ccount expert are reasonabed 566.14 0.00 0.00	s listed in lines 6-24. nses. The monthly expenses for health bly necessary for yourself, your spouse, o	or .	
Add	Add all of the expenses and lines 6 through 23. Ilitional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ns These are addition Note: Do not includity insurance, and healt nce, and health savings a	al deduction de any experth savings a accounts that	s allowed by the seallowances ccount expert are reasonabed 566.14 0.00 0.00	s listed in lines 6-24. nses. The monthly expenses for health bly necessary for yourself, your spouse, o	or .	
Add 25.	Add all of the expenses and lines 6 through 23. Ilitional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do Yes Continued contributions continue to pay for the rea	These are addition Note: Do not include ity insurance, and health note, and health savings a total amount? you actually spend? to the care of household sonable and necessary car of your immediate family	al deduction de any exper th savings a accounts that \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	s allowed by the seallowances allowances ccount expert are reasonabed 566.14 0.00 0.00 566.14 members. The port of an elder olde to pay for seallowances.	ce actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	or .	
25. 26.	Add all of the expenses: Add lines 6 through 23. Ilitional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do Yes Continued contributions continue to pay for the rea your household or member include contributions to an Protection against family	These are addition Note: Do not include ity insurance, and health nce, and health savings a total amount? you actually spend? to the care of household sonable and necessary car of your immediate family account of a qualified AB of violence. The reasonable	sal deduction de any exper th savings a accounts that savings a accounts that savings a saccounts that savings a saccounts that savings a savings savi	s allowed by the seal allowances of the seal allowances of the seal are reasonable of the seal are reasonable of the seal allowances of t	ce actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	s	566.14

Debtor 1 Debtor 2	Joseph B Klepka, Jr Regina L Klepka	Case number (if known)			
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and operating	g expenses	s on		
	If you believe that you have home energy c 8, then fill in the excess amount of home er	osts that are more than the home energy costs included in $\boldsymbol{\varepsilon}$ nergy costs	expenses o	on line		
	You must give your case trustee documents amount claimed is reasonable and necessary	ation of your actual expenses, and you must show that the a	dditional	;	\$	0.00
29.		Iren who are younger than 18. The monthly expenses (not pendent children who are younger than 18 years old to atte				
	You must give your case trustee documents claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the not already accounted for in lines 6-23.	amount			
	* Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after the date of	adjustmen	t.	\$	0.00
		he monthly amount by which your actual food and clothing ϵ_1 allowances in the IRS National Standards. That amount cas in the IRS National Standards.				
		ional allowance, go online using the link specified in the sep so be available at the bankruptcy clerk's office.	arate			
	You must show that the additional amount of	claimed is reasonable and necessary.		;	\$	0.00
31.	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in the form of canization. 11 U.S.C. § 548(d)(3) and (4).	ish or finar	ncial		
	Do not include any amount more than 15%	of your gross monthly income.		;	\$	0.00
32.	Add all of the additional expense deduct Add lines 25 through 31.	ions.		\$	566.	14
Ded	uctions for Debt Payment					
7	oans, and other secured debt, fill in lines To calculate the total average monthly paym creditor in the 60 months after you file for bar Mortgages on your home	ent, add all amounts that are contractually due to each secu	ired		erage monthly yment	
33a.	Copy line 9b here			=> \$	989.0	0
	Loans on your first two vehicles			_		_
33b.	Orange Prog. 40h. homo			=> \$	541.0	0
33c.				=> \$	0.0	
				Ψ_	0.0	<u> </u>
33d. Nam	List other secured debts: e of each creditor for other secured debt	in	oes payme clude taxes insurance	S		
			l No			
	-NONE-		Yes	\$		
			l No			
				\$		
				* -		_
			Yes	+ \$_		
				Copy		
33e	Total average monthly payment. Add lines	\$ 33a through 33d\$\$	30.00		\$1,530.	00_

-									
34. Are any or other	debts that you listed in property necessary for	line 33 secured by your p your support or the supp	orimary residence or of your d	ence, a vehicle ependents?	2 ,				
□ No.	Go to line 35.								
■ Yes.	listed in line 33, to keep	ou must pay to a creditor, in possession of your propertill in the information below.	n addition to the d	ne payments cure amount).					
Name of the	creditor	Identify property that s	ecures the deb	t	Tot	al cure amount		Monthl	
1st Colon	ial Community	201 Paris Avenue 08030 Camden Co Market Value \$112 cost of sale = \$10	ounty 2,172.00 mir			5.00	÷ 60 = \$	amoun	0.08
	oan Servicing	201 Paris Avenue 08030 Camden Co Market Value \$112	Brooklawn ounty 2,172.00 mir	, NJ			÷ 60 = \$		0.08
OCWCII EC	oun oci vienig	cost of sale = \$10	0,954.60	\$	_		÷ 60 = \$ ÷ 60 = +\$		0.00
				Total	\$	0.16	Copy total here=	 \$	0.1
				, ota,)		nere=	>	
					\$ _ \$	0.00 890.00	÷ 60	\$_	0.0
Office of the Exec To find a li	the United States Courts utive Office for United States ist of district multipliers that in	as stated on the list issued I (for districts in Alabama an ates Trustees (for all other of noludes your district, go online s list may also be available at th	d North Carol districts). using the link sp	ina) or by	x _	10.00	-		
	monthly administrative ex				5	89.00	Copy tot here=>		89.0
	of the deductions for des 33e through 36.	ebt payment.						\$	1,619.16
otal Deduc	tions from Income								
8. Add all c	of the allowed deduction	ıs.							
, ,	ne 24, All of the expenses e allowances	allowed under IRS	\$	8,988.38	3				
Copy lir	ne 32, All of the additional	l expense deductions	\$	566.14	<u> </u>				
Copy lir	ne 37, All of the deduction	ns for debt payment	+\$	1,619.16	<u> </u>	i			
Total de	eductions		\$	11,173.68		Copy total here=>		\$	11,173.6

Debtor 1
Debtor 2
Debtor 2
Debtor 2
Debtor 2
Debtor 3
Debtor 4
Debtor 1
Debtor 2
Debtor 1
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Debtor 4
Debtor 5
Debtor 5
Debtor 6
Debtor 7
Deb

Case number (if known)

Part 2: De	etermine rot	ır Disposable Income Under 1	11 U.S.C. § 1325(b)(2)			
		rent monthly income from lin				\$ 12,388.26
children disability received	n. The month y payments for d in accordan	Ily necessary income you rec ly average of any child support or a dependent child, reported i ce with applicable nonbankrupt ended for such child.	payments, foster care paymern Part I of Form 122C-1, that y	nts, or ou	\$	0.00
employe in 11 U.S	er withheld fro S.C. § 541(b)	etirement deductions. The moment wages as contributions for quarter (7) plus all required repayment . § 362(b)(19).	ualified retirement plans, as s	pecified	\$	2.19
42. Total of	all deduction	ns allowed under 11 U.S.C. §	707(b)(2)(A). Copy line 38 he	ere =>	\$11,173	3.68
expense their exp	es and you ha penses. You	ial circumstances. If special ci ave no reasonable alternative, o must give your case trustee a d ocumentation for the expenses	describe the special circumstal letailed explanation of the spec	nces and		
Describe th	ne special ci	rcumstances	Amount	of expens	se	
			\$			
			* \$			
			\$			
			Total \$		Copy here=>\$	0.00
44. Total ac	djustments.	Add lines 40 through 43.		=> \$_	11,585.87	Copy here=> -\$11,585.87
		thly disposable income unde	r § 1325(b)(2). Subtract line 4	4 from line	∋ 39.	\$802.39
46. Change have ch time you you filed	e in income of anged or are ur case will be d your petition	or expenses. If the income in F virtually certain to change after e open, fill in the information be a, check 122C-1 in the first colu in when the increase occurred,	the date you filed your bankri low. For example, if the wages mn, enter line 2 in the second	uptcy petiti reported column, e	ion and during the increased after	
Form	Line	Reason for change	Date of	change	Increase or decrease?	Amount of change
☐ 122C-1 ☐ 122C-2 ☐ 122C-1					☐ Increase ☐ Decrease ☐ Increase	\$

Debtor 1 Debtor 2	Joseph B Klepka, Jr Regina L Klepka		Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the info	rmatior	on this statement and in any attachments is true and correct.
X.	/s/ Joseph B Klepka, Jr Joseph B Klepka, Jr Signature of Debtor 1	X	/s/ Regina L Klepka Regina L Klepka Signature of Debtor 2
Date	February 8, 2019 MM / DD / YYYY	Date	February 8, 2019 MM / DD / YYYY

Joseph B Klepka, Jr

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 08/01/2018 to 01/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: West Deptford Township

Income by Month:

6 Months Ago:	08/2018	\$164.47
5 Months Ago:	09/2018	\$228.07
4 Months Ago:	10/2018	\$307.02
3 Months Ago:	11/2018	\$241.23
2 Months Ago:	12/2018	\$122.81
Last Month:	01/2019	\$73.01
	Average per month:	\$189.44

Debtor 1 Debtor 2 Regina L Klepka Tr

Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 08/01/2018 to 01/31/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: PSE&G

Income by Month:

6 Months Ago:	08/2018	\$14,480.91
5 Months Ago:	09/2018	\$10,013.39
4 Months Ago:	10/2018	\$13,377.65
3 Months Ago:	11/2018	\$12,004.08
2 Months Ago:	12/2018	\$12,000.00
Last Month:	01/2019	\$11,316.89
	Average per month:	\$12,198.82

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT		
DISTRICT OF NEW JERSEY		
Caption in Compliance with D.N.J. LBR 9004-1(b) Brad J. Sadek, Esquire 1315 Walnut Street Suite 502 Philadelphia, PA 19107 215-545-0008 brad@sadeklaw.com		
In Re:		
Joseph B Klepka, Jr Regina L Klepka	Case No.:	
•	Chapter:	13
	Judge:	
DISCLOSURE OF CHAPTER 13 DEBTO	R'S ATTORNEY C	OMPENSATION
1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 20 the debtor(s) and that compensation was paid to me within one yagreed to be paid to me, for services rendered or to be rendered with this bankruptcy case is as follows:	vear before the filed date of	the petition, or
■ Under D.N.J. LBR 2016-5(b), I have agreed to accept to the exclusions listed below, including administrative samount of \$	services that may occur pos onstrate that additional servi ompensation and reimburse	tconfirmation, a flat fee in the ces were unforeseeable at the ment of necessary expenses.
Representation of the debtor in: adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brough		
I have received:	\$1,845.00	
The balance due is:	\$2,905.00	
The balance ■ will □ will not be paid through t	he plan.	
☐ Under D.N.J. LBR 2016-5(c), I have agreed to accept case, an hourly fee of \$ The hourly fee charged by this client range from \$ to \$ I understand that expenses to be paid to me in this case post petition pursu	other members of my firm I must receive the Court's	that may provide services to
I have received:	\$	
2. The source of the funds paid to me was:		
■ Debtor(s) □ Other (specify below	7)	

3.	If a balance is due, the source of future compensation to be paid to me is:		
	■ Debtor(s)	☐ Other (specify below)	
	I have agreed to share compensation	to share compensation with another person(s) unless they are members of my law ation with a person(s) who is not a member of my law firm, a copy of that ag in the compensation is attached.	
Date:	February 8, 2019	/s/ Brad J. Sadek, Esquire Brad J. Sadek, Esquire Debtor's Attorney	

United States Bankruptcy CourtDistrict of New Jersey

In re	Joseph B Klepka, Jr Regina L Klepka		Case No.	
		Debtor(s)	Chapter	13
	VERI	FICATION OF CREDITOR	MATRIX	
The ab	ove-named Debtors hereby verify th	at the attached list of creditors is true and c	orrect to the best	of their knowledge.
Date:	February 8, 2019	/s/ Joseph B Klepka, Jr		
		Joseph B Klepka, Jr		
		Signature of Debtor		
Date:	February 8, 2019	/s/ Regina L Klepka		
		Regina L Klepka		

Signature of Debtor

1st Colonial Community 210 Lake Dr E Ste 300 Cherry Hill, NJ 08002

Chase Card Services Correspondence Dept Po Box 15298 Wilmington, DE 19850

Citibank/Best Buy Attn: Bankruptcy Po Box 790441 St. Louis, MO 63179

Citibank/Goodyear Citibank Corp/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citibank/The Home Depot Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179

Citicards Cbna Citi Bank Po Box 6077 Sioux Falls, SD 57117

Comenity Bank/Torrid Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 45318

Comenity Capital/mprc Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Comenitycapital/boscov Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

Energy People Fcu Po Box 279 Medford, NJ 08055

Kohls/Capital One Kohls Credit Po Box 3120 Milwaukee, WI 53201

Lincoln Automotive Financial Service Attn: Bankruptcy Po Box 542000 Omaha, NE 68154

Lyons Dougherty and Valdez 136 Gaither Dr. Suite 100 PO Box 1269 Mount Laurel, NJ 08054

Ocwen Loan Servicing Attn: Research/Bankruptcy 1661 Worthington Rd Ste 100 West Palm Beach, FL 33409

Syncb/Toys "R" Us Attn: Bankruptcy Po Box 965004 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Lowes Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896 Synchrony Bank/Old Navy Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/QVC Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/TJX Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Synchrony Bank/Walmart Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Target Card Services Mail Stop NCB-0461 Minneapolis, MN 55440

TD Bank, N.A. 32 Chestnut Street Po Box 1377 Lewiston, ME 04243

Unity Federal Credit

Wells Fargo/Bob's Discount Furniture Attn: Bankruptcy Po Box 10438 Des Moines, IA 50306